PATENT APPLICATION FEE DETERMINATION RECORD

Application or Docket Number

Effective October 1, 2003									10/303				
CLAIMS AS FILED - PART I (Column 1) (Column 2)									SMALL ENTITY OTHER T				
ΓŦ	OTAL CLAIMS	3			(Column 2)]	TYPE			OR	SMALL	ENTITY
			12		· · · · · · · · · · · · · · · · · · ·		Ì	RATE		FEE	_	RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA			BASIC F	EE	385.00	OR	BASIC FE	770.00
TOTAL CHARGEABLE CLAIMS			/2 minus 20=		* 0			X\$ 9:	=		OR	X\$18=	
INDEPENDENT CLAIMS			2 minus 3 =		* .0			X43=			OR	X86=	†
М	ULTIPLE DEPE	NDENT CLAIM F	RESENT					4.45	\dashv		1		
*	f the difference	e in column 1 is	less than :	ess than zero, enter "0" in				+145=	_	-11	OR	L	
CLAIMS AS AMENDED - PART II								TOTA	L L	388	OR	TOTAL	
(Column 1) (Column 2) (Column 3)								SMAL	LE	NTITY	OR	OTHER SMALL	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUME PREVIO PAID F	ST BER USLY	PRESENT EXTRA		RATE	Т	ADDI- TIONAL FEE]	RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=			OR	X\$18=	
	Independent	*	Minus	***		= ,	ł	X43=	\dagger			X86=	.÷
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						ŀ	+145=	+		OR		
, L											OR	+290=	
									E		OR ,	TOTAL ADDIT: FEE	
AMENDMENT B		(Column 1) CLAIMS		(Colum		(Column 3)	_						
		REMAINING AFTER AMENDMENT		NUMB PREVIOU PAID F	ER USLY	PRESENT EXTRA		RATE		ADDI- IONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=			OR	X\$18=	
	Independent	*	Minus	***		=	t	X43=	T			X86=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+145=	╀		OH	7,00-	
									Ļ		OR	+290=	
·								TOTAL DDIT. FEE			OR A	TOTAL DDIT. FEE	
(Column 1) (Column 2) (Column 3) CLAIMS HIGHEST												•	
MEN		REMAINING AFTER AMENDMENT		NUMBE PREVIOU PAID FO	R	PRESENT EXTRA		RATE	TI	DDI- ONAL EEE		RATE	ADDI- TIONAL FEE
	Total	* .	Minus	**.		= .	Γ	X\$ 9=			OR	X\$18=	
	Independent		Minus	***		=	⊢	X43=	\vdash	-			·
1	FIRST PRESE	NTATION OF MU	LTIPLE DEF	PENDENT C	LAIM		\vdash	~ ~~~	-		OR	X86=	
* If the entry in column 1 is less than the ntry in column 2, write "0" in column 3.											OR	+290=	•
	the "Highest Nun the "Highest Nun	nber Previously Pain nber Previously Pain per Previously Pain	d For" IN THIS d For" IN THI	S SPACE is le S SPACE is le	ess than	20, enter "20."		TOTAL DIT. FEE		·		TOTAL DDIT. FEE	